

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
or **Fax** (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/757,610	01/11/2001	Jonathan S. Stamler	28195-504	8014

TITLE OF INVENTION: INHIBITING GS-FDH TO MODULATE NO BIOACTIVITY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	01/03/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
TELLER, ROY R	1654	514-018000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

**Mintz, Levin, Cohn, Ferris,  
Glovsky and Popeo, P.C.**  
**Ivor R. Elrifi**  
**Matthew Pavao**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**DUKE UNIVERSITY**

**Durham, North Carolina**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies **10**

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☒ A check is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number **50-0311** (enclose an extra copy of this form).

Attorney Docket No.  
**28195-504**

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*Matthew Pavao*

Date

**12-29-06**

Typed or printed name

**Matthew Pavao**

Registration No.

**50,572**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Express Mail Label No.: EV 978769731US

Date of Deposit: December 29, 2006

Attorney Docket No. 28195-504



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Stamler et al.  
SERIAL NUMBER: 09/757,610 EXAMINER: Roy R. Teller  
FILING DATE: January 11, 2002 ART UNIT: 1654  
TITLE: INHIBITING GS-FDH TO MODULATE NO BIOACTIVITY

**Mail Stop Issue Fee**

Commissioner for Patents  
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Alexandria, VA 22313-1450

**TRANSMITTAL LETTER**

Transmitted herewith for filing in the present application are the following documents:

1. Response to Notice of Allowance (1 pg);
2. Completed Form PTOL-85B (1 pg);
3. Check (#23591) in the amount of \$1,030.00; and
4. Return Postcard.

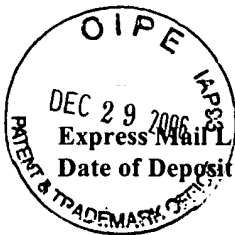
Applicants believe that no additional fees are due in connection with this submission. However, the Commissioner is authorized to credit any overpayment or charge any deficiencies to Deposit Account No. 50-0311, Reference No. 28195-504. A duplicate copy of this Transmittal Letter is enclosed.

If the enclosed papers are considered incomplete, the Mail Room is respectfully requested to contact the undersigned collect at (617) 542-6000, Boston, Massachusetts.

Respectfully submitted,

Ivor R. Elrifi, Reg. No. 39,529  
Matthew Pavao, Reg. No. 50,572  
Attorneys for Applicant  
c/o MINTZ, LEVIN  
Tel: (617) 542-6000  
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Customer No.: 30623

Dated: December 29, 2006



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**RESPONSE TO NOTICE OF ALLOWANCE**

The present paper is filed in response to the Notice of Allowance and Issue Fee Due, dated October 3, 2006. A response is due January 3, 2007.

A check in the amount of \$1,030.00 is enclosed herewith to cover the issue fee (\$700.00), publication fee (\$300.00) and the advanced order of ten (10) copies (\$30.00). A copy of Form PTOL-85B is also enclosed herewith.

The Commissioner is hereby authorized to charge any additional fees that may be due, or to credit any overpayment, to Account 50-0311; Attorney Reference No. 28195-504 (Customer Number: 30623).

Respectfully submitted,

Ivor R. Elrifi, Reg. No. 39,529  
Matthew Pavao, Reg. No. 50,572  
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Tel: (617) 542-6000  
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Customer No.: 30623

Dated: December 29, 2006